



## PART-TIME NON-BENEFITTED EMPLOYMENT OPPORTUNITY

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<http://www.tempe.gov>

**Administrative Assistant/Part Time- Temporary  
(Community Services – Social Services Division)  
\$9.00/hour**

OPENING DATE: September 20, 2006

CLOSING DATE: Subject to closing without notice when the needs of the City are met.

HOURS: Part-time, weekdays 16-19 hours per week, hours may vary.  
Primarily afternoons until closing at 6:00 p.m.

MINIMUM  
REQUIREMENTS Requires Equivalent to the completion of the twelfth grade.  
General clerical experience including public contact required.

APPLICANT  
REQUIREMENT: Per City of Tempe Rules and Regulations, Rule 3, Section  
301.H, "no parent, spouse, or child of a regular City of Tempe  
employee, City Council person, Board or Commission member  
can be hired as a temporary employee."

DUTIES Perform a variety of routine clerical work including filing, verifying  
and recording information on records. Act as receptionist:  
answer telephones and wait on general public, providing routine  
and general information. Sort and file documents and records,  
maintain alphabetical index and cross reference files. Receive,  
sort and distribute incoming and outgoing correspondence.  
Enter data on computers.

INFORMATION: 480-350-5496

SELECTION  
CRITERIA: Applicants whose experience and training are most closely  
suited to the needs of the City may be selected for further tests  
or interviews. Criteria will be based on job-related knowledge,  
skills, and abilities.

APPLY AT: City of Tempe, Human Resources Office  
20 E. 6<sup>th</sup> St., Tempe

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Applications must be returned to Human Resources

The City of Tempe is an Equal Opportunity/Reasonable Accommodation Employer



# City of Tempe / Application for Employment

City of Tempe / Human Resources / 20 East Sixth Street / Tempe AZ 85281 / (480) 350-8276 / TDD (480) 350-8400 / <http://www.tempe.gov>

**The City of Tempe is an Equal Opportunity / Reasonable Accommodation Employer.**

***The City of Tempe Promotes a Drug and Alcohol Free Workplace.***

## DIRECTIONS:

Read the recruitment bulletin before completing this application - request a copy if not provided. Answer all questions completely including any supplemental forms. Type or print neatly in black ink. Sign this application and all other forms. Any omission, misstatement, or falsification may be cause for rejection of this application, removal of your name from an eligibility list, or discharge from City Service.

1. Position Applying For: \_\_\_\_\_ Recruitment Code (RC#): \_\_\_\_\_
2. Name (Last, First, Middle Initial): \_\_\_\_\_
3. Social Security Number: \_\_\_\_\_
4. Mailing Address: \_\_\_\_\_  
Street Address City State Zip
5. Phone Number: HOME: \_\_\_\_\_ WORK: \_\_\_\_\_
6. Driver's License (Number, State, Class): \_\_\_\_\_
7. Are you a U.S. Citizen or a non-U.S. Citizen authorized to work in the United States? Yes No
8. Have you ever worked for the City of Tempe? Yes No If Yes, from \_\_\_\_\_ (Mo/Yr) to \_\_\_\_\_ (Mo/Yr)  
If you are a current City of Tempe employee, are you: Temporary? Regular?  
Have you completed your initial six (6) month probationary period? Yes No
9. To assist us with verifying previous work experience and /or education, please list other names you have gone by:  
\_\_\_\_\_
10. Type of position you will accept: Full Time Part Time Regular Temporary
11. Are you claiming Civil Service Preference for Veteran's under ARS 38-492:
  - As a qualified or disabled veteran? Yes No If yes, you must submit Form DD214, or certification from the Veteran's Administration.
  - As a spouse of an eligible veteran pursuant to ARS 38-492(D)? Yes No If yes, you must submit Form DD214, or certification from the Veteran's Administration.
12. Are you related to any member of the Tempe City Council or any Tempe Commission/Board Member, or any City of Tempe employee? Yes No If Yes, indicate his/her **Name, Position, and Relationship to you:**  
\_\_\_\_\_

**DO NOT WRITE BELOW THIS LINE - TURN PAGE AND CONTINUE**

Q ☐ NQ ☐ A ☐ B ☐ C ☐ Application Entered ☐

HR Review ☐

Date

Department Review ☐

Date

***Proof of Education and/or Professional Registration(s), License(s), and Certification(s) will be required prior to hire/promotion.***

13. Do you have a High School Diploma or a G.E.D.?      Yes      No

14. Education from an **Accredited** College/University:

| College: | Major: | Type of Degree: | Degree Completed: | Credit Hours: |
|----------|--------|-----------------|-------------------|---------------|
|          |        |                 | Yes    No         |               |
|          |        |                 | Yes    No         |               |
|          |        |                 | Yes    No         |               |
|          |        |                 | Yes    No         |               |

15. Trade and/or Technical Schools:

| Trade/Technical School: | Subject Studied: | Type of Degree: | Degree Completed: | Credit Hours: |
|-------------------------|------------------|-----------------|-------------------|---------------|
|                         |                  |                 | Yes    No         |               |
|                         |                  |                 | Yes    No         |               |

16a. Professional Registration(s), License(s), and/or Certification(s) you possess ***that relate to this position:***

| Type of Professional Registration, License, and/or Certification: | License Number (if applicable): | Date Received: | Expiration Date (if applicable): |
|---|---------------------------------|----------------|----------------------------------|
|   |                                 |                |                                  |
|   |                                 |                |                                  |

16b. Special training ***that relates to this position:***

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17. List computer software program(s) with which you are proficient in operating ***that relate to this position:***

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18. List equipment with which you are proficient in operating ***that relate to this position:***

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19. Language Proficiency (Other than English):

| Language: | Speak:    | Read:     | Write:    |
|-----------|-----------|-----------|-----------|
|           | Yes    No | Yes    No | Yes    No |
|           | Yes    No | Yes    No | Yes    No |
|           | Yes    No | Yes    No | Yes    No |

20. **May we contact your current employer if you are considered for hire/promotion?**      Yes      No

***You may make copies and use as many of these sheets as necessary to continue your employment history.***

Begin with your present or most recent position. List all jobs, paid or volunteer, for at least the past ten years. Your qualifications will be evaluated **solely** on the application form and, if applicable, any supplemental questionnaire(s).

RESUMES MAY **NOT** BE SUBSTITUTED FOR THE REQUESTED INFORMATION.

**DO NOT WRITE "SEE RESUME" IN THE SPACES BELOW.**

|   |                                 |
|---|---------------------------------|
| Employer:                                 | Type of Business:               |
| Address:                                  | Phone:                          |
| Job Title:                                | Number of Employees Supervised: |
| Supervisor (Name/Title/Phone):            |                                 |
| Employment Dates: from (Mo/Yr) to (Mo/Yr) | Total Time Employed: Yrs Mos    |
| Hours Per Week:                           | Present/Ending Wage: \$ Per     |
| Work Performed:                           |                                 |
| Reason for Leaving:                       |                                 |

|   |                                 |
|---|---------------------------------|
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| Hours Per Week:                           | Ending Wage: \$ Per             |
| Work Performed:                           |                                 |
| Reason for Leaving:                       |                                 |

|   |                                 |
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| Hours Per Week:                           | Ending Wage: \$ Per             |
| Work Performed:                           |                                 |
| Reason for Leaving:                       |                                 |

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| Work Performed:                           |                                 |
| Reason for Leaving:                       |                                 |

|   |                                 |
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| Work Performed:                           |                                 |
| Reason for Leaving:                       |                                 |

|   |                                 |
|---|---------------------------------|
| Employer:                                 | Type of Business:               |
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| Hours Per Week:                           | Ending Wage: \$ Per             |
| Work Performed:                           |                                 |
| Reason for Leaving:                       |                                 |

|                                |                                 |     |         |
|--------------------------------|---------------------------------|-----|---------|
| Employer:                      | Type of Business:               |     |         |
| Address:                       | Phone:                          |     |         |
| Job Title:                     | Number of Employees Supervised: |     |         |
| Supervisor (Name/Title/Phone): |                                 |     |         |
| Employment Dates: from         | (Mo/Yr)                         | to  | (Mo/Yr) |
| Total Time Employed:           |                                 | Yrs | Mos     |
| Hours Per Week:                | Ending Wage: \$                 |     | Per     |
| Work Performed:                |                                 |     |         |
| Reason for Leaving:            |                                 |     |         |

21. Have you ever been requested or forced to resign from a position for misconduct or unsatisfactory service?

Yes No If Yes, please explain:

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22. Have you ever been convicted of a **misdemeanor** or **felony** (other than minor/civil traffic offenses), placed on probation, fined or given a suspended sentence (include military trial convictions)?

*Note: Reckless operation, hit-and-run, D.U.I., excessive speeding, and similar charges are NOT considered minor traffic offenses. Moreover, an excessive number of traffic violations (including minor/civil offenses) should be reported.*

Yes No If Yes, provide charges, dates and locations:

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**Convictions will not automatically bar an applicant from employment for City jobs. The relationship of the conviction to the job, as well as its severity, the passage of time, and subsequent job performance will all be considered.**

**PLEASE READ THIS STATEMENT AND CAREFULLY REVIEW YOUR ENTIRE APPLICATION MATERIAL .**

I certify that all statements made on the application form and, if applicable, any supplemental questionnaire(s) are true and complete. I understand that any omission, misstatement, or falsification may be cause for rejection of this application, removal of my name from an eligibility list(s), and/or discharge from City Service. In addition, I authorize any individual, company, organization, or institution to release any and all information concerning statements made by me on this application, and I do hereby release all parties and individuals connected therewith from all liabilities for any damages whatsoever incurred in furnishing such information.

By checking this box and typing your name below, you certify that you have read and understand the above paragraph.

Print Applicant's Name: \_\_\_\_\_ Date\_\_\_\_\_

Applicant Signature\_\_\_\_\_ Date\_\_\_\_\_

***The City of Tempe does not accept faxed copies of applications.***